

MAY 22 2006

Facsimile Transmittal

FAX

To: Commissioner for Patents

From: Beth A Sanders

Fax Number: 5712738300

Date: 05/22/2006

Pages: 6 (including cover page)

Re: Serial No. 10/653,521

Comments:

Attached are the following:
Transmittal Form;
Credit Card Payment Form;
Third Supplemental IDS; and
IDS Statement by Applicant (Form PTO/SB/08A)

MAY 22 2006

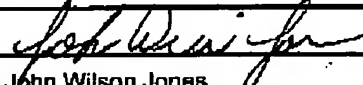
PTO/SB/21 (09-04)

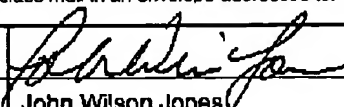
Approved for use through 07/31/2006. OMB 0851-0031
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| | | |
|---|------------------------|-----------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/653,521 |
| | Filing Date | September 2, 2003 |
| | First Named Inventor | Stephenson et al |
| | Art Unit | 3672 |
| | Examiner Name | FULLER, Brian |
| | Attorney Docket Number | 020589-03402 (P202-1230-US) |
| Total Number of Pages in This Submission | | 5 |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement 3rd Supplemental & 1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Credit Card Payment Form (PTO-2038) |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | JONES & SMITH, LLP - Customer Number 54487 | | |
| Signature |  | | |
| Printed name | John Wilson Jones | | |
| Date | May 22, 2006 | Reg. No. | 31,380 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|---|------|--------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460 on the date shown below. | | | |
| Signature |  | | |
| Typed or printed name | John Wilson Jones | Date | May 22, 2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|---|---|---|
| In re Application of: Stephenson et al. | § | Examiner: FULLER, Brian |
| | § | |
| Serial No.: 10/653,521 | § | Group Art Unit: 3672 |
| | § | |
| Filed: September 2, 2003 | § | |
| | § | |
| Title: Method of treating subterranean formations with porous ceramic particulate materials | § | Attorney Docket No. 020569-03402 BJ P202-1230-US |
| | § | |
| | § | |

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

THIRD SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with 37 C.F.R. §§ 1.56 and 1.97, Applicant hereby submits the following reference appearing in the attached form PTO-1449 to the attention of the Examiner:

U.S. PATENTS:

6,766,817 B2

Citation of this reference should not be construed as an admission that it constitutes prior art of the claimed invention.

This Information Disclosure Statement is being submitted before the mailing date of any final action under § 1.113, a notice of allowance under § 1.311, or an action that otherwise closes prosecution of this application.

Applicant believes the fee associated with this submission is \$180.00. Attached hereto is Credit Card Payment Form (PTO-2038) authorizing payment of this fee. However, the

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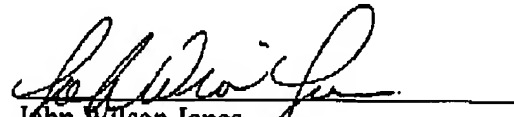
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180.00 OP

Commissioner is authorized to debit any fees necessary for the consideration of this Information Disclosure Statement from the credit card listed on the attached form.

Respectfully submitted,

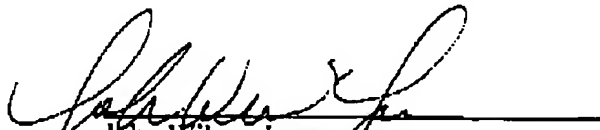
Dated: May 22, 2006


John Wilson Jones
Registration No. 31,380

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CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. 1.6(d)

I hereby certify that this correspondence is being transmitted by facsimile, 571-273-8300
on this the 22nd day of May 2006.


John Wilson Jones

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| Application Number | 10/853,521 |
| Filing Date | September 2, 2003 |
| First Named Inventor | Stephenson et al |
| Art Unit | 3672 |
| Examiner Name | FULLER, Brian |
| Attorney Docket Number | 020569-03402 (P202-1230-US) |

PAGE 6/6 * RCVD AT 5/22/2006 8:25:32 PM [Eastern Daylight Time] * SVR:USPTO-EFAXRF-1/12 * DNIS:2738300 * CSID:(713)893-6071 * DURATION (mm-ss):01-54